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PTO/SB/05 (03-01) o for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION

Please type a plus sign (+) inside this box -

Attorney Docket No. Basil Brown First Inventor

TRANSMITTAL

| Title 7 | | 10-21 1 | | CT | 707 | 120 | 921 | U |
|---------|-------|----------|---|----|-----|-----|-----|---|
| | Title | . | 7 | | | | | |

| Conty for thew montprovision | nai applications under 37 CFR 1.53(b) |) <u> </u> | Rpress Iviali Label Ivo. C 10 20 21 121 | <u> </u> | | | |
|---|--|------------|---|------------|--|--|--|
| APPLICATION ELEMENTS | | | ASSISTANT Commissioner for Patents ADDRESS TO: Box Patent Application | | | | |
| See MPEP chapter 600 concerning utility patent application contents. | | nts. | Washington, DC 20231 | | | | |
| 1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. X Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages [preferred errangement set forth below]] - Descriptive title of the invention | | | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: | | | | |
| - Statement Reg - Reference to so or a computer p - Background of - Brief Summary - Brief Description - Detailed Description - Claim(s) | of the Invention on of the Drawings <i>(if filed</i>) iption | | i. CD-ROM or CD-R (2 copies); or i. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of | | | | |
| - Abstract of the | Disclosure | | 10. (when there is an assignee) Attorney | | | | |
| 4. X Drawing(s) (35 L5. Oath or Declaration | I.S.C. 113) [Total Sheets | j | 11. English Translation Document (if applicable) 12. Information Disclosure Copies of ID Statement (IDS)/PTO-1449 Citations | s | | | |
| - [v] | uted (original or copy) | , | Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment | | | | |
| Copy from a | ned (digital of copy) prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed) | | 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | | | | |
| Signed sta | TON OF INVENTOR(S) Interpret attached deleting inventor(s) Ithe prior application, see 37 CFR | | 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) | | | | |
| 1.63(d)(2) | and 1.33(b). | | 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/3 or its equivalent. | 35 | | | |
| 6 Application Data | Sheet. See 37 CFR 1.76 | | 17. Other: | | | | |
| 18. If a CONTINUING APPLI or in an Application Data She | CATION, check appropriate box, and set under 37 CFR 1.76: | supply the | he requisite information below and in a preliminary amendme | nt, | | | |
| Continuation | Divisional Continuation-in-part (C | IP) | of prior application No.:/ | | | | |
| Prior application information: | Examiner | | Group Art Unit: | | | | |
| Box 5b, is considered a part of | f the disclosure of the accompanying cor | ntinuation | lor application, from which an oath or declaration is supplied uno n or divisional application and is hereby incorporated by referen- ly omitted from the submitted application parts. | der ce. | | | |
| | 19. CORRESPO | NDENCE | E ADDRESS | | | | |
| Customer Number or Ber Co | ode Label | t Law Comm | or X Correspondence address below | | | | |
| Name | Basil Brown | | | | | | |
| | P.O. Box 3473 | | | | | | |
| Address | | | | | | | |
| City | Cedar Hill | Stat | ate Texas Zip Code 75106 | | | | |
| Country | | Telephoi | | 84 | | | |
| Name (Print/Type) | Basil Brown | | Registration No. (Attorney/Agent) | 了 | | | |
| Signature | Basil Bron | _ | Date 10/29/2001 | 7 | | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

| Complete if Known | | | | |
|----------------------|------------------|--|--|--|
| Application Number | | | | |
| Filing Date | October 29, 2000 | | | |
| First Named Inventor | Basil Brown | | | |
| Examiner Name | | | | |
| Group Art Unit | | | | |
| Attorney Docket No. | | | | |

| METHOD OF PAYMENT FEE CALCULATION (continued) | | | | | | |
|--|----------|----------------|--------|--------------|--|----------|
| The Commissioner is hereby authorized to charge | 3. AD | DIT | ON | AL FE | ES | |
| indicated fees and credit any overpayments to: Deposit | | Large Entit | | Sma | | |
| Account Number | Fee | Fee | - | Entit Fee | Fee Description | Fee Paid |
| Deposit | Code | (\$) | Code | | • | |
| Account Name | 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| Applicant claims small entity status. | 139 | 130 | 139 | 130 | Non-English specification | |
| See 37 CFR 1.27 | 147 2 | ,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 2. Payment Enclosed: Check X Credit card Money Order Other | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| FEE CALCULATION | 113 1 | ,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1. BASIC FILING FEE | 115 | 110 | 215 | 55 | Extension for reply within first month | |
| Large Entity Small Entity | 116 | 400 | 216 | 200 | Extension for reply within second month | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid | 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 404 740 204 270 Hillish Stine for | 118 1 | ,440 | 218 | 720 | Extension for reply within fourth month | |
| 106 330 206 165 Design filing fee | 128 1 | ,960 | 228 | 980 | Extension for reply within fifth month | |
| 107 510 207 255 Plant filing fee | 119 | 320 | 219 | 160 | Notice of Appeal | |
| 108 740 208 370 Reissue filing feeO | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 114 160 214 80 Provisional filing fee | 121 | 280 | 221 | 140 | Request for oral hearing | |
| CURTOTAL (4) (5)270 00 | 138 1 | ,510 | 138 1 | 1,510 | Petition to institute a public use proceeding | |
| SUBTOTAL (1) (\$)370.00 | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES Fee from | 141 1, | ,280 | 241 | 640 | Petition to revive - unintentional | |
| Extra Claims below Fee Paid | | | | | Utility issue fee (or reissue) | |
| Total Claims | | | | 230 | Design issue fee | |
| Claims Multiple Dependent | | | | 310 | Plant issue fee | |
| | | | | 130 | Petitions to the Commissioner | |
| Large Entity Small Entity | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| Fee Fee Fee Fee Description | 126 | 180 | 126 | 180 | Submission of Information Disclosure Strnt | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 102 84 202 42 Independent claims in excess of 3 | 146 | 740 | 246 | 370 | Filing a submission after final rejection | |
| 104 280 204 140 Multiple dependent claim, if not paid | 149 | 740 | 249 | 370 | (37 CFR § 1.129(a)) For each additional invention to be | |
| 109 84 209 42 ** Reissue independent claims over original patent | 145 | 740 | 243 | 3/0 | examined (37 CFR § 1.129(b)) | |
| 110 18 210 9 ** Reissue claims in excess of 20 | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| and over original patent | 169 9 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| SUBTOTAL (2) (\$) -0- | Other fe | ee (sp | ecify) | | | |
| **or number previously paid, if greater; For Reissues, see above | *Reduc | ed by | Basic | Filing | Fee Paid SUBTOTAL (3) (\$) | -0- |

SUBMITTED BY Complete (if applicable) Registration No. (Attorney/Agent) Name (Print/Type) (972)228-384 Telephone 10/29/2001 Signature

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